CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 5			
3 CANDIDATE/ OFFICEHOLDER	MS / MRS / MR FIRST James	мі R	OFFICE USE ONLY			
NAME	NICKNAME LAST		Date Received			
	DePiazza					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; C	STATE; ZIP CODE y TX 75056				
Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked			
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST	МІ	Receipt # Amount \$			
NAME	Connnie NICKNAME LAST		Date Processed			
	Hudson		Date Imaged			
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SL	JITE #; CITY; STATE;	ZIP CODE			
TREASURER ADDRESS		The Colony TX	75056			
(Residence or Business)						
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION				
9 REPORT TYPE	January 15 30th day before electrical 30th day b		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month Day Year	Month	Day Year			
0012112	10 / 28 / 2018 THROUGH 12 / 31 / 2018					
11 ELECTION	ELECTION DATE	ELECTION TYPE				
	Month Day Year Primary	Runoff Other Description				
	General	Special				
12 OFFICE	OFFICE HELD (if any) Justice of the Peace Precinct #2	13 OFFICE SOUGHT (if known)			
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME			15 Filer ID (Ethics Commission Filers)			
James R DePiazza						
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANE	IOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPEND DIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE V DISENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT TH URES.	ITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S			
	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
	SPECIFIC	COMMITTEE ADDRESS				
_		COMMITTEE CAMPAIGN TREASURER NAME				
Additional Pages						
		COMMITTEE CAMPAIGN TREASURER ADDRESS				
17 CONTRIBUTION TOTALS	1. TOTAL I					
	2. TOTAL (OTHER	\$.00				
EXPENDITURE TOTALS	3. TOTAL UNLESS	\$.00				
	4. TOTAL	4. TOTAL POLITICAL EXPENDITURES				
CONTRIBUTION BALANCE	5. TOTAL I	\$2,119.43				
OUTSTANDING LOAN TOTALS	6. TOTAL I	THE \$.00				
18 AFFIDAVIT						
		true and correct and includes all in under Title 15, Election Code C-C66D-43C	Decivity to at the accompanying report is required to be reported by me E-B116-DB567(
			ndidat or Officeholder			
AFFIX NOTARY STAM	P/SEALABOVE					
Sworn to and subsc	, this the					
day of	, 20,	to certify which, witness my hand and seal of office				
Signature of officer a	dministering oath	Printed name of officer administering oath	Title of officer administering oath			

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER NAME	ımission Filers)				
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT			
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS				
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$\$0.00			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$\$0.00			
4.	SCHEDULE E: LOANS		\$\$0.00			
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$\$1,364.22			
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS				
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS				
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$\$0.00			
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FU	NDS	\$\$200.00			
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	A BUSINESS OF C/OH	\$\$0.00			
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$\$0.00			
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBURETURNED TO FILER	TIONS	\$\$0.00			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	2 FILER NAME James R DePiazza		3 Filer ID (Ethics Commission Filers)		
4 Date 10/30/2018	5 Payee name Minuteman Press				
6 Amount (\$) \$1,364.22	7 Payee address; City; State; Zip Code 6700 Main St Suite 112 The Colony TX	75056			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) AdvertisingExpense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
Amount (\$)	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		utside of Texas. Complete Schedule T. n, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
Amount (\$)	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED		

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Travel In District
Travel Out Of District

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

(Candidate/Officeholder/Politic Credit Card Payment	cal Committee	Legal Services The Instru			s/Wages/Contract Labor complete this form.	Other (enter a cate	egory not listed above)	
1	Total pages Schedule G:	2 FILER NA James R					3 Filer ID (Eth	nics Commission Filers)	
4	Date 11/08/2018	5 Payee nar Denton C	ne ounty GOP						
6	Amount (\$) \$150.00 Reimbursement from political contributions intended	7 Payee add 2921 Count Suite 102		City; State; Denton	Zip Code TX	76210			
8	PURPOSE OF EXPENDITURE		(See Categories I gExpense	sted at the top of thi	s schedule)		utside of Texas. Complete Sc		
9	Complete ONLY if direct expenditure to benefit C/C		ate / Officeho	older name		Office sought		Office held	
	Date 11/15/2018	Payee nar The Color		of Commerce					
	Amount (\$) \$50.00 Reimbursement from political contributions intended	Payee add PO Box 56		City; State; The Colony	Zip Code TX	75056			
	PURPOSE OF EXPENDITURE	Category Fees	(See Categories I	sted at the top of thi	s schedule)		utside of Texas. Complete Sc		
	Complete ONLY if direct expenditure to benefit C/C		ate / Officeho	older name		Office sought		Office held	
	Date	Payee nar	ne						
	Amount (\$) Reimbursement from political contributions intended	Payee add	dress;	City; State;	Zip Code				
	PURPOSE OF EXPENDITURE	Category	(See Categories I	sted at the top of thi	s schedule)		utside of Texas. Complete Sc		
	Complete ONLY if direct expenditure to benefit C/C		ate / Officeho	older name		Office sought		Office held	
		ATTA	CH ADDITIO	ONAL COPIES	OF THIS	SCHEDULE AS NEI	EDED		